Great Ormond Street Hospital for Children
NHS Foundation Trust

Appointment Brief

Non-Executive Director
The organisation

Great Ormond Street Hospital for Children NHS Foundation Trust (GOSH) is a national centre of excellence in the provision of specialist children's health care, currently delivering the widest range of specialist care of any children's hospital in the UK. It is the only specialist Biomedical Research Centre for paediatrics, the largest centre in the UK for children with heart or brain problems, and the largest centre in Europe for children with cancer. It works in partnership with the UCL Institute of Child Health (ICH), part of University College London, and together they form the largest paediatric research and teaching centre in the UK.

The hospital at Great Ormond Street is the only exclusively specialist children's hospital in the UK. It does not have an Accident and Emergency department and only accepts specialist referrals from other hospitals and community services. The population of children served by the hospital is characterised by those with multiple disabilities and/or health problems and rare and congenital (present at birth) conditions. Many children need the help of different specialist teams. Improvements in health care and diagnosis mean that many children have dramatically improved survival rates and more therapeutic options than was the case 10 years ago. Sadly though, many of the children cared for at GOSH still have life-threatening or life-limiting conditions.

The hospital receives over 220,000 patient visits (inpatient admissions or outpatient appointments) a year, and carries our approximately 18,800 operations each year.

The hospital has 355 patient beds, including 36 intensive care beds. Many of the children and young people on our wards require high dependency care or are classed as ward intensive care, requiring one-to-one nursing.

Around 3,800 full-time and part-time staff work at the hospital. The ICH has around 600 staff. Many senior staff have roles in both organisations.

The hospital has approximately 50 paediatric specialties, the widest range of any hospital in the UK, which uniquely enables it to diagnose and pioneer treatments for children with highly complex, rare or multiple conditions. More than half of the Trust’s patients come from outside London, and it provides the largest paediatric centre in the UK for:

- paediatric intensive care;
- cardiac surgery – one of the largest heart transplant centres for children in the world;
- neurosurgery – carrying out about 60 per cent of all UK operations for children with epilepsy;
- paediatric cancer services – with University College London Hospitals (UCLH), the Trust is one of the largest centres in Europe for children with cancer; and
- nephrology and renal transplants.
• Children treated from overseas in our International and Private patients’ (IPP) wing.

To achieve its vision, the Trust is currently working to:

• provide the best patient experience and outcomes;
• be an excellent place to work and learn;
• deliver world-class research;
• be the partner of choice; and
• be sustainable.

GOSH has also recently developed its values, in consultation with its staff, patients and families, defining itself as:

• Always welcoming;
• Always helpful;
• Always expert;
• Always one team

A document summarising the Always Values and how they shape our behaviours and decisions is attached as Appendix 1.

Leading research and development

Working with the UCL Institute of Child Health (ICH), GOSH is one of the largest centres for research into childhood illness in the world. The Trust is the UK’s only academic Biomedical Research Centre (BRC) specialising in paediatrics. It is a member of University College London (UCL) Partners, an alliance for world-class research benefitting patients which brings together a number of pre-eminent hospitals and universities across London. Through carrying out research with international partners, GOSH has developed a number of new clinical treatments and techniques that are used around the world.

Taking forward the Research and Development strategy, the Trust is working to develop a Centre for Research into Rare Disease in Children. This facility, due to open in 2017, will be used by GOSH and the ICH to discover new ways to treat children with rare diseases and speed up the process from bench to bedside.

Education and training for staff working in children’s healthcare

The Trust offers a wide prospectus of learning to all staff groups. Together with London South Bank University, GOSH trains the largest number of children’s nurses in the UK. The Trust also plays a leading role in training paediatric doctors and other health professionals, which includes training on non-technical skills (human factors). The aim is to work in partnership across all areas of the Trust to ensure the prospectus supports staff to be the best that they can be.

Newly qualified staff form a substantial core of the ward workforce. GOSH runs a number of job fairs each year to market GOSH to new nurses who are graduating.
Clinical Performance

Demand for our services is increasing with our recent trajectory showing an increase of 45 per cent in our inpatient activity and 75 per cent increase in outpatient activity over the past five years.

The Trust’s patient case mix is at the most complex end of the spectrum, with many patients being referred because it is the only centre that has the expertise to provide treatment. Offering this highly specialised service is fundamental to what GOSH is about, but it does present significant clinical, operational and financial challenges. The retention of key healthcare professionals is vital for the Trust to sustain its growth and support the increasing demand for services. The national shortage of highly skilled paediatric nurses and the high cost of living in London has made this difficult, but progress is being made.

Financial Position

In common with other acute trusts, the Trust continues to experience financial uncertainty due to continuing changes in commissioning strategies, limits in growth of specialised commissioning budgets, reductions in tariff prices, challenging productivity targets, increased costs to deliver new regulatory requirements and a demanding capital programme.

The Trust has prepared a financial plan for the next three years which forecasts that the Trust will move from a small surplus in 2014/15 to a deficit in 2015/16 and for the subsequent years of this plan.

Beyond, 2015/16, the risk of changes in the rules for determining paediatric specialist top up rates, expected to be implemented for 2016/17, are a particular concern as the Trust receives one of the highest values of paediatric specialist top up in the country. Another key risk is the continuing requirement to deliver productivity and efficiency savings whilst there are further delays in commissioner lead system wide restructuring. Together these matters create significant uncertainties.

For more information, please visit the Trust’s website at http://www.gosh.nhs.uk/
The role

Job Summary

The non-executive directors (NEDs) are responsible for providing appropriate oversight, governance and leadership to the trust in the pursuit of its strategies. NEDs should monitor the performance of management in meeting agreed goals. They should satisfy themselves as to the integrity of financial, clinical and other information, and that financial and clinical quality controls and systems of risk management are robust and defensible. They are responsible for determining appropriate levels of remuneration of executive directors and have a prime role in appointing, and where necessary removing, executive directors.

The Great Ormond Street Hospital (GOSH) board of directors is a unitary board and as such the non-executive directors and executive directors make decisions as a single group and share the same responsibility and liability.

Responsibilities include:

1. Strategy

   - Establishing clear objectives to deliver the trust’s agreed strategy, development, and long-term sustainability to meet its Terms of Authorisation, contributing to constructive debate upon – and regularly reviewing performance against – those objectives;

   - Setting challenging objectives for improving performance of the trust and ensuring effective implementation of board of director decisions by the chief executive and the senior management team;

   - Holding the chief executive to account for the effective management and delivery of the organisation’s strategic aims and objectives, including achieving the trust’s commitment to patients and targets for treatment;

   - Providing vision to the foundation trust to capitalise on the freedoms it enjoys as a result of its status;

   - Building and maintaining close relations between the foundation trust’s constituencies, and stakeholder groups to promote the effective operation of the trust’s activities;

2. Compliance

   - Ensuring that the foundation trust complies with its Terms of Authorisation, the constitution and any other applicable legislation and regulations, including the maintenance of mandatory services and retention of protected property.
• Maintaining the trust’s financial viability, controlling and reporting on financial affairs in accordance with the requirements set out by Monitor, in order to maximise effective treatment for patients;

• Ensuring that financial controls and systems of risk management are robust and that the board is kept fully informed through timely and relevant information;

• Participating in the appointment of the chief executive and other senior staff, as appropriate;

• With the assistance of the trust secretary, promoting the highest standards of corporate and clinical governance in compliance with the *NHS Foundation Trust Code of Governance* and other regulatory requirements and best practice, where appropriate;

• Upholding the values of the trust by example, safeguarding the trust’s reputation, and ensuring that the organisation promotes human rights and equality and diversity for all its patients, staff and other stakeholders;

3. **Board activities**

• Participating fully in the work of the board, ensuring the corporate responsibility of the board of directors by working corporately with all directors of the trust.

• Attending and possibly chairing, committees and other ad hoc meetings of the main board.

• Liaising and co-operating with the members’ council, and having due regard of their opinions, as appropriate.

• Participating in any board induction, training and evaluation identified as an individual and as part of the board or committee.

• Working with the senior independent director on the annual performance evaluation of the chairman, in line with the process agreed by the members’ council and reporting back to the members’ council appropriately.

• Undergoing an individual and board performance appraisal, and attending any additional training highlighted as a result of the evaluation process.

4. **Communications and relationships**

• Bring independent judgment and experience based on commercial, financial, legal or governance expertise from outside the Trust and apply this to the benefit of the trust, its stakeholders and its wider community;
- Uphold the values of the Trust, act as an appropriate role model, and uphold the highest standards of integrity and probity.

**Review**

This job description will be subject to review by the Board of Directors and the Members’ Council as appropriate.
Person specification

- Extensive Board level experience in a large/complex/changing organisation
- Healthcare or social services background
- High level of understanding and interest in healthcare issues, specifically in relation to corporate governance and clinical governance.
- Understanding of child protection issues, child and family patient experience, and/or clinical ethics would be valuable
- An understanding of financial and resourcing issues and an ability to understand complex strategic questions
- A commitment to NHS values, the Trust's Always Values and principles of NHS foundation trusts
- Highly developed interpersonal, communication and leadership skills
- Sound, independent judgement, political astuteness and diplomacy
- Clear understanding, and acceptance, of the legal duties, liabilities and responsibilities of non-executive directors
- Sufficient time and commitment to fulfil the role
Terms and conditions of service

These are the terms and conditions under which your appointment has been made. These are the standard terms and conditions for Non-Executive Directors of Great Ormond Street Hospital for Children NHS Foundation Trust. It is important that you read these carefully and contact the Company Secretary should you have any queries. Please indicate your acceptance of these terms and conditions by signing one copy and returning to the Company Secretary.

1. **Statutory basis for appointment** – Chairmen and non-executive members hold a statutory office under the National Health Service Act 2006. The appointment and tenure of office are governed by the requirements of the Act and the Foundation Trust’s Constitution. Your appointment is made by the Members’ Council. It does not create any contract of employment or contract for services between you and the Foundation Trust.

2. **Tenure of office** – The length of appointment will be determined by the Members’ Council in accordance with the requirements of the Foundation Trust Constitution and Monitor’s Code of Governance for NHS Foundation Trusts. Your appointment tenure will be set out in your letter of appointment. Your appointment will be subject to annual appraisal by the Chairman in accordance with a process agreed with the Members’ Council.

3. **Employment law** – Appointments are not within the jurisdiction of Employment Tribunals. Neither is there any entitlement for compensation for loss of office through employment law.

4. **Fit & Proper Person Test (Health & Social Care Act 2008 (Regulated Activities))**
   All providers are required to demonstrate that appropriate processes are in place to confirm that directors (and NEDs) are of good character, hold the required qualifications and have the competence; skills and experience required which may include appropriate communication and leadership skills, as well as a caring and compassionate nature.

   The fitness of directors will be regularly reviewed after and during appointment. In addition, non-executive directors have a responsibility to report any mismanagement or misconduct issues to the Chairman of the Trust Board.

5. **Reappointments** – The Foundation Trust Constitution requires Non-Executive Directors to be appointed following a process of open competition. Non-Executive Directors are eligible to stand for reappointment under this process subject to satisfactory appraisal during their initial term and meeting all requirements of the Foundation Trust Constitution. There is no automatic right to be reappointed and any
decision will be made by the Members’ Council. In doing so, the Members’ Council will consider performance during the initial term, the make-up of the Board of Directors in terms of its skills, diversity and geographical representation, and the requirements of the NHS Foundation Trust Code of Governance in relation to the maximum tenure of Non-Executive Directors.

6. **Removal from office**

a. **Resignation** – You may resign at any time by giving reasonable notice in writing to the Company Secretary or in the case of a Non-Executive Director to the Trust Chairman.

b. **Termination of appointment**

The Trust may terminate your term of office if any of the following conditions apply:

- you become disqualified from office (see below);
- it is not in the interests of the Health Service that you should continue to hold office.
- if you do not attend three consecutive meetings of the Board of Directors unless the Board of Directors is satisfied that the absences were due to reasonable causes and you will be able to start attending meetings of the Board of Directors again within such a period as the Board of Directors consider reasonable.
- if you do not properly comply with the requirements of the regulations with regard to pecuniary interests in matters under discussion at meetings of the Trust (e.g. a failure to disclose such an interest).
- if you refuse to sign and deliver to the Company Secretary a statement in the form required by the Board of Directors confirming acceptance of the Code of Conduct for Directors.

The following list provides examples of matters which may indicate to the Trust that it is no longer in the interests of the Health Service that an Appointee continues in office. The list is not intended to be exhaustive or definitive; the Trust will consider each case on its merits, taking account of all relevant factors.

- If you no longer enjoy the confidence of the Members’ Council.
- If you fail to ensure that the Board of Directors monitors the performance of the Trust in an effective way.
- If you fail to deliver work against pre-agreed targets incorporated within your annual objectives.
- If there is a terminal break down in essential relationships e.g. between you and the rest of the Board of Directors and/or the Members’ Council.
- If you fail to meet the requirements of the Fit and Proper Person Test.
The removal of a non-executive director shall be in accordance with the following procedures:

- any proposal for removal must be proposed by a councillor and seconded by not less than ten councillors, including at least two elected councillors and two appointed councillors;
- written reasons for the proposal shall be provided to the non-executive director in question, who shall be given the opportunity to respond to such reasons;
- in making any decision to remove a non-executive director, the Members’ Council shall take into account the annual appraisal carried out by the Chairman;
- removal of a non-executive director shall require the approval of three-quarters of the members of the Members’ Council;

Appointment will also be terminated if, in accordance with the Constitution, you become disqualified from holding the appointment by virtue of any of the following circumstances:

- You have been adjudged bankrupt or your estate sequestrated and (in either case) you have not been discharged.
- You have made a composition or arrangement with, or granted a trust deed for, your creditors and have not been discharged in respect of it.
- Within the preceding five years you have been convicted in the British Islands of any offence if a sentence of imprisonment (whether suspended or not) for a period of not less than three months (without the option of a fine) was imposed on you.
- You have been required to notify the police of his/her name and address as a result of being convicted or cautioned under the Sex Offenders Act or other relevant legislation or whose name appears on the Protection of Children Act List;
- You are a member of the Members’ Council or a councillor or director of an NHS body;
- You are the spouse, partner, parent or child of a member of the Board of Directors of the Trust;
- You are a member of a local authority’s scrutiny committee covering health matters;
- You are the subject of a disqualification order made under the Company Directors Disqualification Act 1986;
- You are a person whose tenure of office as a chairman or as a member or director of an NHS body has been terminated on the grounds that his appointment is not in the interests of the health service, for non-attendance at meetings, or for non-disclosure of a pecuniary interest;
- You have within the preceding two years been dismissed, otherwise than by reason of redundancy, from any paid employment with an NHS body;
- You have refused without reasonable cause to fulfill any training requirement established by the Board of Directors; or
- You have refused to sign and deliver to the Company Secretary a statement in the form required by the Board of Directors confirming acceptance of the code of conduct for directors, as the same may be in force from time to time.
7. **Remuneration** – You are entitled to be remunerated by the Foundation Trust for so long as you continue to hold office as a Non-Executive Director. You are entitled to receive remuneration only in relation to the period for which you hold office. There is no entitlement to compensation for loss of office. In accordance with the Constitution, remuneration for Non-Executive Directors will be set by the Members’ Council.

The remuneration for a Non-Executive Director is £14,000 per annum.

Your fees and remuneration will be subject to applicable UK statutory deductions, including deductions for income tax, national insurance and similar liabilities.

8. **Tax and National Insurance** – Remuneration is taxable under Schedule E, and subject to Class I National Insurance contributions. Any queries on these arrangements should be taken up with the Inspector of Taxes or the Contributions Agency respectively.

9. **Allowances** – Chairmen and Non-Executive Directors are also eligible to claim allowances, at rates set by the Foundation Trust, for travel and subsistence costs necessarily incurred on Foundation Trust business.

10. **Eligibility for NHS Pension** - Non-executive directors are not eligible to join the NHS Pension Scheme.

11. **Time commitment** – This may include some time commitment during the working day or in the evening according to the requirements of the Foundation Trust. The time commitment for Non-Executive Directors is 2½ days a month. A Non-Executive Director who is also the Audit Committee Chairman will need to spend additional time on these duties. By accepting this appointment, you confirm that you have sufficient time to undertake your duties as a Non-Executive Director and have informed the Foundation Trust of your existing significant commitments prior to taking up the position. Any future changes to your other significant commitments should be reported to the Company Secretary.

12. **Public speaking** – On matters affecting the work of the Foundation Trust, Non-Executive Directors should not normally make political speeches or engage in other political activities. In cases of doubt, the guidance of the Trust Chairman or Company Secretary should be sought.

13. **Conflict of interest** – The Foundation Trust Constitution requires Board Directors to declare any pecuniary, personal or family interest, whether that interest is direct or indirect, in any proposed contract or other matter which is under consideration or is to be considered by the Board of Directors. A family interest will include those of a Director’s spouse or partner. Such interests include:

- directorships, including non-executive directorships held in private companies, public limited companies or public benefit corporations (with the exception of those of dormant companies);
• ownership or part-ownership of private companies, businesses or consultancies likely or possibly seeking to do business with the NHS;
• majority or controlling shareholdings in organisations likely or possibly seeking to do business with the NHS;
• a position of Trust or fiduciary duty in a charity or voluntary organisation in the field of health and social care;
• any connection with a voluntary or other organisation contracting for NHS services;
• research funding/grants that may be received by an individual or their department;
• any other commercial interest in the decision before the meeting;
• to the extent not covered above, any connection with an organisation, entity or company considering entering into or having entered into a financial arrangement with the Trust, including but not limited to lenders or banks; or
• membership of clubs, societies or organisations whose purpose may include furthering the business or personal interests of their members by undeclared or informal means. Such organisations include Masonic lodges and religious societies whose membership consists of professional and business people.

Further guidance on the relevance of an interest is available from the Trust Chairman or Company Secretary.

14. **Indemnity** – The Foundation Trust will indemnify you against personal civil liability which you may incur in whilst carrying out your Board functions, providing that at the time of incurring the liability, you were acting honestly and in good faith, and not recklessly.

15. **Disclosure and Barring Service (previously CRB)** - As a regulated organisation, Great Ormond Street Hospital requires all employees, contractors and temporary workers to undertake a DBS check prior to commencing any employment/placement. You will be asked prior to employment/placement to provide documentation to evidence your identity; in turn this will be used to undertake a check against the police service national computer database (to review any criminal convictions or cautions).

This process is repeated every 3 years.

Individuals are required to report any police caution or conviction that may occur at any time during their employment/placement at Great Ormond Street Hospital. The Trust reserves the right to withdraw any offer of employment made on the basis of the outcome of a DBS check.

16. **Trust Property** – On request and in any event on termination of your office for any reason you are required to return to the Trust all Trust property including your security pass and all keys, computer hardware and software provided by the Trust.
Terms of appointment

The role will be based at Great Ormond Street Hospital in central London, with responsibility across a range of sites.

How to indicate your interest

For an informal and confidential discussion about the role, please contact Dr Anna Ferrant, Company Secretary on 020 7813 8330 or via email anna.ferrant@gosh.nhs.uk

Applications should be sent:

- By email to: kala.diran@gosh.nhs.uk (please include in the title of your email ‘GOSH NED APPLICATION’)
- By post to:

Ms Kala Diran
Senior Business Support Assistant
Great Ormond Street Hospital for Children NHS Foundation Trust
Human Resources Directorate
Level 2, Barclay House
37 Queens Square
London WC1N 3BH

You will receive acknowledgement of your application within two days of receipt.

Closing date for applications

The closing date for applications is **5.00pm on Monday 9th November 2015**.

Please enclose with your application:

- the separate equal opportunities monitoring sheet. Applications from all groups are warmly welcomed;
- a full CV;
- a covering letter of no more than 2 pages (total) summarising your proven ability related to the person specification.

For shortlisted candidates, two references will be sought prior to interview.

Interviews will take place on **Friday 4th December 2015**.
Our Always Values and Behaviours

We are proud of Our Always Values and Behaviours. They were developed by 2,644 patients, families and members of staff who told us the difference we make when we are at our best. These are the words patients and families used to describe their experiences at GOSH when we make the most difference.

Our Always Values and Behaviours will shape:

- The way we plan and make decisions.
- The way we behave with patients, families and each other.
- How we recruit, induct and develop staff.
- How we measure and keep improving everyone’s experience.
## Our Always Values and Behaviours

<table>
<thead>
<tr>
<th>Our Standards</th>
<th>People want to see staff who are...</th>
<th>People don’t want to see staff who are...</th>
</tr>
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<tbody>
<tr>
<td><strong>Respect</strong></td>
<td>• Open to everyone regardless of their views, culture, ideas, role or seniority</td>
<td>• Judgemental, make assumptions about people</td>
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<td></td>
<td>• Positive and cheerful, with an enthusiastic attitude</td>
<td>• Bullying, belittling, gossiping, patronising to others</td>
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<td></td>
<td>• Warm, and make people feel welcome</td>
<td>• Negative, moaning, complaining</td>
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<td></td>
<td>• Polite to everyone</td>
<td>• Grumpy, sullen, huffing or bored-looking</td>
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<tr>
<td></td>
<td>• Courteous, say 'hello my name is, my role is, and may I'</td>
<td>• 'Unavailable', disrespectful or ignoring people</td>
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<tr>
<td><strong>Smiles</strong></td>
<td>• Prompt, value others' time, keep waiting to an absolute minimum, use time efficiently</td>
<td>• Rude, abrupt, aggressive, short-tempered</td>
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<td></td>
<td>• Thoughtful, make waiting feel less anxious / boring</td>
<td>• Disorganised, causing unnecessary delays, time-wasting</td>
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<tr>
<td><strong>Friendly</strong></td>
<td>• Respectful, and treat people as individuals</td>
<td>• Poor at timekeeping, make people wait</td>
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<td></td>
<td>• Considerate of people's feelings</td>
<td>• Insensitive to, or undermining of, other people</td>
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<td></td>
<td>• Caring, supportive, go out of their way to be helpful even if it’s outside their role</td>
<td>• Not interested in getting to know people</td>
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<td><strong>Reduce waiting</strong></td>
<td>• Always ‘rushing around’ or “too busy”</td>
<td>• ‘Not my job’, ‘walk past’ people who need help</td>
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<td></td>
<td>• Patient, and make enough time for people</td>
<td>• Unhelpful, make people feel like a burden</td>
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<td></td>
<td>• Flexible</td>
<td>• Inflexible</td>
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<td><strong>Understanding</strong></td>
<td>• ‘Can-do’, and keep promises</td>
<td>• Unreliable, make promises they can’t or don’t keep</td>
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<td></td>
<td>• Accountable, take responsibility for their actions</td>
<td>• Irresponsible, shift, or don’t take, responsibility</td>
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<tr>
<td><strong>Helps others</strong></td>
<td>• A role model in all they do</td>
<td>• Unduly passing their stress on to other people</td>
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<td></td>
<td>• Calm, and put people at ease</td>
<td>• Quick to blame others or look to ‘pass the buck’</td>
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<tr>
<td><strong>Patient</strong></td>
<td>• Consistently practising high standards of safety and hygiene</td>
<td>• Unhygienic; smoke in uniform; accepting of poor cleanliness</td>
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<tr>
<td></td>
<td>• Vigilant, always speak up if safety is compromised</td>
<td>• Inconsistent, careless, cut corners</td>
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<tr>
<td><strong>Professional</strong></td>
<td>• Constantly striving for quality - to be the best</td>
<td>• Not interested in doing a great job</td>
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<td></td>
<td>• Always aiming to deliver even better outcomes</td>
<td>• Happy with ‘good enough’</td>
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<td><strong>Safe</strong></td>
<td>• Proactive, using research and learning to improve</td>
<td>• Resistant to change, focused on problems</td>
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<td></td>
<td>• Always looking for innovative solutions to problems</td>
<td>• Not motivated to take the initiative to get better</td>
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<tr>
<td><strong>Excellence</strong></td>
<td>• Willing to take the time to listen, and hear, people</td>
<td>• Not listening...“Tells me what I think”</td>
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<td></td>
<td>• Interested in what people have to say</td>
<td>• Indifference to other people's opinions or views</td>
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<td><strong>Improving</strong></td>
<td>• Informative, ensure people know what’s happening</td>
<td>• Not interested in keeping people informed and updated</td>
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<td></td>
<td>• Mindful to explain clearly, and talk on a level with people</td>
<td>• Patronising, talk down to people</td>
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<tr>
<td><strong>Listen</strong></td>
<td>• Proactive in involving patients, families and colleagues</td>
<td>• Dismissive, treat other people as less important</td>
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<td></td>
<td>• Keen to share knowledge, information and learning</td>
<td>• Unwilling to involve people in decisions</td>
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<td><strong>Communicate</strong></td>
<td>• Appreciative, giving open, honest feedback</td>
<td>• Unappreciative of other people’s efforts</td>
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<td></td>
<td>• Positive advocates, speak up and encourage others to do so</td>
<td>• Reluctant to give, or receive, feedback openly</td>
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The child first and always

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NHS Foundation Trust

NHS